

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Everett

Group Art Unit: 2143

Serial No: 10/034,470

Examiner: Boutah, Alina A.

Title: Classification Support System and  
Method for Fragmented IP Packets

Intellectual Property Law  
International Business Machines

Attention: Office of Petitions  
Mail Stop Petitions  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Fax: (571) 273-8300

**PETITION TO WITHDRAW HOLDING OF ABANDONMENT  
BASED ON FAILURE TO RECEIVE OFFICE ACTION**

Dear Sir:

Applicants petition the Director to withdraw the holding of abandonment and  
re-mail the Office Action that was never received.

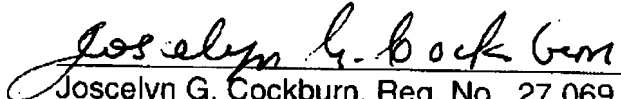
The petition is supported by the following:

1. Statement from Joscelyn George Cockburn (Attorney of Record)  
stating the office letter or office action mailed on February 24, 2006  
was not received; attesting the fact that a search of the file jacket and  
records indicate that said office action was not received and a copy of  
the docket record is attached.

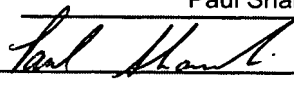
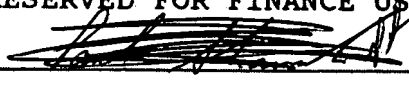
Please charge IBM Deposit Account Number **09-1990** for the **\$500.00** fee. The  
Commissioner is authorized to charge payment of any additional fees required or to  
credit any overpayment to the designated Deposit Account.

10034470  
CKHLOK 091990  
05/21/2007  
\$ 500.00 CR

Respectfully submitted,

  
\_\_\_\_\_  
Joscelyn G. Cockburn, Reg. No. 27,069  
Tele. No.: 919-543-9036 / Fax 919-254-2649  
Customer Number 25299  
IBM Corporation  
IP Law Dept. YXSA/B002  
P.O. Box 12195  
Research Triangle Park, NC 27709

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: <u>06/11/07</u>		2 Serial/Patent # <u>10034470</u>			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
X	Petition	none	04/12/07	\$ 500.00	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
			7 TOTAL AMOUNT OF REFUND		\$ 500.00
			8 TO BE REFUNDED BY:		
			Treasury Check		
			X	Credit Deposit A/C #:	
			9	0	9
				--	1
				9	9
				0	0
10 REASON:					
	Overpayment				
	Duplicate Payment				
X	No Fee Due (Explanation):				
There is no fee associated with the filing of a petition pursuant to 37 CFR 1.181.					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: <u>Paul Shanowski</u>		TITLE: <u>Senior Attorney</u>			
SIGNATURE: <u></u>		PHONE: <u>571-272-3225</u>			
OFFICE: <u>Office of Petitions</u>					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: <u></u>		DATE: <u>6/21/07</u>			

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*